

Breastfeeding Action Plan

Purpose Statement

The most current data from the CDC Breastfeeding Report Card in 2018 indicates that breastfeeding is initiated in 81.5% of the general population and by six months that number drops to 51.4% in the state of Iowa. Breastfeeding initiation and duration rates for Iowa WIC participants have generally been at least 10 percent lower than the initiation and duration rates from the entire population. This trend may be partially explained by Iowa's high rates of women with young children in the work force and the general lack of breastfeeding support. Despite the increasing knowledge of the benefits of breastfeeding, mothers continue to face many barriers. Often times they lose confidence in their ability to succeed and lack support from their families, social networks, employers and from many health professionals, including hospital and physician office staff, to continue breastfeeding. Support for breastfeeding mothers through WIC's Breastfeeding Peer Counseling Program, offered in more than half of the WIC agencies throughout the state, has significantly impacted breastfeeding initiation and duration rates.

Objective 1

By September 30, 2020, increase the proportion of Iowa WIC participants who breastfeed from 71% to 72% at birth and from 22% to 23% at 6 months

Objective 2

By September 30, 2020, expand and enhance services provided to WIC participants receiving peer support through the Iowa WIC Breastfeeding Peer Counseling program by increasing educational, networking, and partnership opportunities for peer programs.

Data System Action Plan

Purpose Statement:

There is not a comprehensive business continuity plan/disaster recovery plan (BCP/DRP) specific to the WIC management information system and EBT host system and processes. The WIC Technical Operations team needs a single source to reference to respond to a major outage or disaster. Further, the BCP should include annual testing of the plan and any backup systems or processes. This is a significant undertaking, as the systems involve multiple support and host contractors as well as Department staff, with BCP efforts requiring coordination with all of these parties.

Objective:

By September 30, 2020, business continuity assessment will be conducted with drafting of a business continuity plan specific to the technology systems of WIC will begin.

Outreach Action Plan – Collaboration with local WIC agencies to increase participation past the 1st Birthday.

Objective

By July 1, 2020, a WIC outreach plan aimed at decreasing the prevalence of participants failing to reapply after the child's first birthday will be implemented. WIC Participant numbers for ages 1-5 are decreasing not only state wide but nationally. These participants are still eligible for benefits and there still exists a need to provide them with the nutritional benefits of the WIC program. Data reports will be run in conjunction with this outreach program to have accurate data to enhance the materials and education presented at conclusion of program.

Purpose Statement

WIC participant levels have been steadily decreasing over the last century. WIC is a supplemental nutrition program for babies, children under the age of 5, pregnant women, breastfeeding women, and women who have had a baby in the last 6 months. Our current outreach for the current RFP is to close the Gap between our enrollment numbers (participants that are certified within the Focus system) and participation (participants that have benefits and are actively coming to appointments).

In 2010 the U.S. Department of Agriculture ERS Summary Report showed that on average 22.9% of participants within the WIC program in the US exit the program after their child's first birthday. The Iowa Departments of Public Health mission is to protect and improve the health of Iowans. By these participants not receiving much needed services for 4 out of there 5 first years of life we are missing an opportunity to enhance the lives of the children of low income families in Iowa starting the next generation of Iowa on the path to health and a greater tomorrow.

Due to the decrease in both participant levels and funding on a national level the need to keep participants enrolled has never been greater. This is both to increase health outcomes across Iowa but also to ensure the agencies that provide services across the state have the recourses and funding to provide much needed support in their communities. This project is aimed at both providing education to local agencies and to enhance the communication between the state and the individuals providing services in all the counties of Iowa.

Vendor Action Plan

Objective

By September 30, 2020 enhance the local agency procedures and execution of Educational Buys across the state.

Purpose Statement

Starting in October 2018, local agencies have been given the opportunity to complete Educational Buys. Educational Buys are an attempt by WIC staff to complete a WIC transaction at an approved Iowa WIC vendor using an eWIC card. Educational buys are used to familiarize staff with purchasing processes, measure training effectiveness, identify transaction issues, and develop corrective action plans for the program. Local agencies will be required to complete these buys starting in October 2019. The state office will use information gathered and feedback from the local agencies completing the Educational Buys to modify the current processes to improve local agency staff's knowledge of vendor related issues and improve participant education and their shopping experience.

Nutrition and Health Services Action Plan: Research our nutrition risk codes and determine which risks will be labeled as high risk and which will be low risk.

Objective

By September 30, 2020, the Iowa WIC Program will have researched and reviewed the evidence for each nutrition risk utilized by the program and determine if there is justification to assign it High Risk designation or not.

Purpose Statement

Requiring nutrition risk as an eligibility criterion is a unique feature of the WIC Program. The National WIC Association (NWA) and the Food and Nutrition Services (FNS) division of the United States Department of Agriculture (USDA) make up a Risk Identification and Selection Collaborative (RISC) group that is charged with revising, adding, and in some cases, discontinuing the allowed WIC nutrition criteria. State WIC agencies are responsible for determining their nutrition risk priorities within these risks, and determining their procedure for high risk participants. Iowa currently uses the definition of high risk to be "a nutrition problem or the potential for developing a nutrition problem that requires additional assessment, intervention, monitoring and evaluation by a licensed dietitian" from the Journal of American Dietetic Association 2003; 103(6):1061-1072, but does not currently have a documented process for determining high risk codes. The codes currently listed in policy 215.62 (High-Risk Conditions) have remained the same for an indeterminate amount of time. The Iowa WIC Program could benefit from a standardized review process that looks at the current evidence to determine the nutrition risks that can be impacted the most by requiring at least one consultation with a licensed dietitian (LD) as the aforementioned policy requires. By determining who really needs to see a dietitian for a nutrition education contact, we can more efficiently utilize staff and provide better services to those participants who are most at risk with something that can be impacted by a consult with an LD.